

**Guide to
UnitedHealthcare® Group
Medicare Advantage PPO Plan
and
SilverScript Employer PDP
sponsored by New York Power Authority**

2023

**Medicare-eligible Management Retirees and their
Medicare-eligible Spouses, Dependent Children or
Surviving Spouses**

UnitedHealthcare Group Medicare Advantage PPO Plan is the medical plan and **SilverScript Employer PDP sponsored by New York Power Authority (SilverScript)** is the prescription drug plan for Management retirees, their covered spouses or dependent children, or surviving spouses who are eligible for Medicare.

UnitedHealthcare Group Medicare Advantage PPO plan is a Medicare Advantage PPO plan sponsored by NYPA that delivers all the benefits of Medicare Parts A and B, also known as Original Medicare. The plan combines your current medical coverage plus your Medicare Part A and Part B coverage into one comprehensive medical plan that offers additional benefits and features. This plan is not a supplement plan and does not pay secondary to Medicare. All claims are submitted directly to UnitedHealthcare for payment, not Medicare.

SilverScript combines a standard Medicare Part D prescription drug plan with additional prescription drug coverage provided by NYPA to close the gap between the standard Part D plan and your current coverage. This plan is provided by SilverScript® Insurance Company which is affiliated with CVS Caremark®, NYPA's prescription benefit manager. This prescription drug plan is similar to the CVS Caremark prescription drug plan and **offers more coverage than a standard Medicare Part D plan.**

Because you will soon reach age 65 or will otherwise be eligible for Medicare, these plans will become the NYPA medical and prescription drug coverage available to you after your Medicare effective date.

Any covered members of your family who are **not** eligible for Medicare will stay in the plan they are currently enrolled in.

Included in this packet are:

- *Frequently Asked Questions*, providing you with answers to commonly-asked questions about Medicare Advantage and UnitedHealthcare, and Medicare Part D and SilverScript.
- UnitedHealthcare Group Medicare Advantage PPO 2023 Plan Guide
- SilverScript 2023 *Summary of Benefits*
- Medicare Advantage/SilverScript Enrollment Form.

What You Need to Do

In order to be enrolled in the NYPA Medicare Advantage PPO and SilverScript plans, you need to:

- **Enroll in Medicare Part A and Part B as soon as possible.** You can enroll in Medicare starting three months prior to your 65th birthday. You cannot be enrolled in Medicare Advantage and Medicare Part D unless you are enrolled in Medicare Part A and/or Part B.
- **Complete and sign the enclosed Medicare Advantage/Silver Script Enrollment Form**, selecting the Enrollment option. You will need to include a copy of your Medicare Health Insurance ID card that shows your Medicare Part A and Part B effective dates. Each covered participant (retiree, spouse or dependent child) must complete their own Enrollment Form

when they become eligible for Medicare.

- **Return the completed Medicare Advantage/SilverScript Enrollment Form to NYPA.**

If you are electing to Waive coverage, complete the form, select the Waive coverage option and return the form to NYPA. **If you do not return the completed and signed Medicare Advantage/SilverScript Enrollment Form, decide to waive coverage or are disenrolled from the NYPA-sponsored Medicare Advantage PPO Plan and/or SilverScript plan, you will lose both your medical and prescription drug coverage from NYPA, as well as your NYPA Medicare Part B reimbursement.** You may re-enroll in the plan during Open Enrollment, or if you experience a qualifying event and call the NYPA HR Services Hotline within 30 days of the event.

Keep in mind, in order to be eligible for the NYPA Medicare Part B reimbursement, you must be enrolled in both the NYPA-sponsored Medicare Advantage PPO and SilverScript plans.

You should not enroll in another Medicare Advantage or Medicare prescription plan. You may only be enrolled in one Medicare prescription drug plan or one Medicare Advantage plan at a time. If you are enrolled in the NYPA-sponsored Medicare Advantage PPO Plan, you will also be enrolled in the NYPA-sponsored SilverScript plan. Likewise, if you are enrolled in the NYPA-sponsored SilverScript plan, you will also be enrolled in the NYPA-sponsored Medicare Advantage PPO Plan.

Please take the time to review the *Frequently Asked Questions*. **UnitedHealthcare Customer Service** will be able to answer any questions regarding Medicare Advantage and the NYPA Medicare Advantage PPO Plan. Representatives are available at **(866) 794-2841** seven days a week from 8 a.m. to 8 p.m. eastern time. TTY users should dial 711.

SilverScript Customer Care will be able to answer any questions regarding Medicare Part D or SilverScript, drugs covered and network pharmacies. SilverScript Customer Care representatives can be reached at **(844) 449-0370**, 24 hours a day, 7 days a week. TTY users should call 711.

If you have any questions about eligibility, enrollment in UnitedHealthcare or SilverScript, or your benefits from NYPA, please call the NYPA HR Services Hotline at (914) 287-3114, Monday-Friday, 9 a.m. to 5 p.m. eastern time, or send an email to Retirees@nypa.gov. TTY users should call 711.

FREQUENTLY ASKED QUESTIONS (FAQs)

UnitedHealthcare Group Medicare Advantage PPO Plan and SilverScript Employer PDP sponsored by New York Power Authority (SilverScript) are the medical and prescription drug plans for New York Power Authority (NYPA) Management retirees, their covered spouses or dependent children, or surviving spouses who are eligible for Medicare.

These FAQs will answer many of your questions.

Q1: What is UnitedHealthcare Group Medicare Advantage (PPO) Plan?

A1: UnitedHealthcare Group Medicare Advantage (PPO) Plan is an employer-sponsored group Medicare Advantage Plan. This plan will replace your current NYPA Management Retiree medical plan.

UnitedHealthcare Medicare Advantage PPO combines your current medical coverage plus your Medicare Part A and Part B coverage into one comprehensive medical plan that offers additional benefits and features, including, dental and vision coverage, hearing aid coverage, fitness benefits, nonemergency transportation benefits and meal delivery following an inpatient stay.

Participants who are **not** eligible for Medicare will stay in their current medical plan.

Q2: What is Medicare Advantage?

A2: A Medicare Advantage plan, also called Medicare Part C, combines both Medicare Part A and Medicare Part B into a comprehensive plan with more benefits and features. It is offered through private insurance companies that have been approved by Medicare.

With a Medicare Advantage plan, you get the same coverage as Original Medicare (Part A and Part B), plus additional services not covered by Medicare, such as access to health and wellness programs.

Q3: What is SilverScript Employer PDP sponsored by New York Power Authority?

A3: SilverScript Employer PDP sponsored by New York Power Authority is an employer-provided group Medicare Part D prescription drug plan with additional prescription drug coverage provided by NYPA. It provides prescription drug coverage for Medicare-eligible participants in the NYPA Medicare Advantage PPO plan.

The combination of the Medicare Part D benefit and the additional prescription drug coverage from NYPA will be similar to your current coverage and will provide more coverage than a standard Medicare Part D plan.

Participants who are **not** eligible for Medicare will stay in their current plan

Q4: What does “Employer PDP” mean in “SilverScript Employer PDP”?

A4: “Employer PDP” is the Medicare designation for an Employer-provided group Medicare Part D Prescription Drug Plan.

The plan is provided by SilverScript Insurance Company which is affiliated with CVS Caremark, NYPA’s pharmacy benefit manager.

Q5: What is Medicare Part D?

A5: Medicare Part D is Medicare prescription drug coverage that helps to cover the cost of prescription drugs for anyone who is entitled to Medicare Part A and/or enrolled in Medicare Part B. It is provided through private insurance companies, health plans, or group plans.

Q6: Do I need a Medicare Supplement plan?

A6: No. Medicare supplement plans do not work with Medicare Advantage or Medicare Part D plans. Medicare does not allow you to have claims paid from both the Supplement plan and the Medicare Advantage/Medicare Part D plan.

Q7: Why does NYPA have a Medicare Advantage and a Medicare Part D plan?

A7: The NYPA Medicare Advantage PPO and SilverScript plans are part of our continuing long-term benefit strategy to provide comprehensive retiree benefits that are sustainable.

Eligibility and Enrollment

Q8: Who may be covered by the NYPA Medicare Advantage PPO Plan and SilverScript?

A8: To be eligible for the NYPA-sponsored Medicare Advantage PPO and SilverScript plans, you must:

- Be entitled to Medicare Part A and enrolled in Medicare Part B, and
- Be a U.S. citizen or lawfully present in the United States, and
- Live in the UnitedHealthcare and SilverScript service areas, which are the United States and its territories, and
- Be a NYPA Management retiree or a covered spouse, dependent child or surviving spouse of a NYPA Management retiree, and
- Meet the eligibility requirements for NYPA’s Medicare Advantage PPO plan.

Q9: How do I enroll in the plan?

A9: In order to be enrolled in the NYPA Medicare Advantage PPO plan and SilverScript plan, you need to:

- **Enroll in Medicare Part A and Part B as soon as possible.** You can enroll in Medicare starting three months prior to your 65th birthday. You cannot be enrolled in Medicare Part D unless you are enrolled in Medicare Part A and/or Part B.
- **Complete and sign the enclosed Medicare Advantage/SilverScript Enrollment Form**, including the Medicare Number from your Medicare Health Insurance ID card. ***Each covered participant (retiree, spouse or dependent child) must complete their own Medicare Opt-In Form when they become eligible for Medicare.***
- **Return the completed Form and a copy of your Medicare card to NYPA.**

Q10: What information will NYPA need to enroll me in the plans?

A10: You will be contacted if NYPA needs any information to enroll you in the plans, such as:

- Your Medicare Claim Number from your red, white and blue Medicare Health Insurance card.
- A U.S. street address if your mailing address for NYPA is a P.O. Box. Medicare **requires** a street address for enrollment.



Q11: When does my coverage in the NYPA Medicare Advantage PPO and SilverScript plans start?

A11: Your coverage will begin on your Medicare effective date.

If you are eligible for Medicare because of age, your Medicare effective date is the first of the month in which you reach age 65. For example, if June 12 is your birthday, then your Medicare effective date is June 1.

If your birthday is the first of the month, your Medicare effective date is the first of the month before your birth month. For example, if August 1 is your birthday, then your Medicare effective date is July 1.

Q12: Will I get new ID cards?

A12: Yes, you will get two new ID cards – one from UnitedHealthcare and one from SilverScript – after your enrollment in each plan is processed by Medicare. These ID cards will have your unique ID number.

If your spouse is covered by the plan and eligible for Medicare, they will also get new UnitedHealthcare and SilverScript ID cards when they are eligible for Medicare. Their cards will have a different ID number.

It is important that you each use your own ID cards when visiting your doctor or filling your prescriptions.

Q13: Why are my spouse and I both receiving information from UnitedHealthcare and SilverScript?

A13: Medicare is an individual benefit. That means that every person has their own account with Medicare. Each person in your family will receive their own documents and their own ID cards from UnitedHealthcare and SilverScript when they become eligible for Medicare.

When you go to the doctor or get your prescriptions filled, make sure to use your own ID cards. Your spouse needs to use their own ID cards when they go to the doctor or to get their prescriptions filled.

Q14: What happens to my spouse or my child who is covered on my plan but is not eligible for Medicare?

A14: Your covered spouse and/or your covered child who is **not** eligible for Medicare will continue to be covered on their current medical and prescription drug plan.

Q15: What happens if I don't want to be enrolled in the NYPA Medicare Advantage PPO plan and/or SilverScript plan? Can I keep my current medical and/or prescription drug coverage through NYPA?

A15: No. The NYPA-sponsored UnitedHealthcare Medicare Advantage PPO plan and SilverScript plan will be the only medical and prescription drug plans for participants who are eligible for Medicare and are a Management retiree, or covered spouse, dependent or surviving spouse of a Management retiree. The current plans are **not** available for participants who are eligible for Medicare.

If you do not return the completed and signed Medicare Advantage/SilverScript Enrollment Form, or if you decide to opt out of or you are disenrolled from the NYPA Medicare Advantage PPO plan and/or the SilverScript plan, you will lose both your prescription and medical coverage from NYPA, as well as your NYPA Medicare Part B reimbursement. You may re-enroll in the plan during Open Enrollment, or if you

experience a qualifying event and call the NYPA HR Services Hotline within 30 days of the event.

Keep in mind, in order to be eligible for the NYPA Medicare Part B reimbursement, you must be enrolled in both the NYPA-sponsored Medicare Advantage PPO plan and SilverScript.

Please note: if you decide not to enroll in the NYPA-sponsored SilverScript plan, then you must enroll in another Medicare Part D plan or other creditable prescription drug coverage (coverage that meets Medicare's minimum standards), or you may have to pay a late enrollment penalty when you enroll in the future.

Q16: I am enrolled in another Medicare Advantage plan. Can I be enrolled in the NYPA Medicare Advantage PPO plan as well?

A16: No. You can be enrolled in only one Medicare Advantage plan at a time.

If you are enrolled in another Medicare Advantage plan or another Medicare Part D plan, you will be disenrolled from that plan when you are enrolled in the NYPA-sponsored UnitedHealthcare Medicare Advantage PPO plan and/or SilverScript plan.

Likewise, if you enroll in another Medicare Advantage plan or Medicare Part D plan after you have been enrolled in the NYPA Medicare Advantage PPO and SilverScript plans, you will be disenrolled from both the NYPA Medicare Advantage PPO and SilverScript plans.

Q17: I am enrolled in another Medicare Part D plan. Can I be enrolled in the NYPA-sponsored SilverScript plan as well?

A17: No. You can be enrolled in only one Medicare prescription drug plan at a time.

If you are enrolled in another Medicare prescription drug plan or Medicare Advantage plan with or without prescription drug coverage, you will be disenrolled from that plan when you are enrolled in the NYPA-sponsored SilverScript and/or United Healthcare Medicare Advantage plan.

Likewise, if you enroll in another Medicare prescription drug plan or an individual Medicare Advantage plan with or without prescription drug coverage after you have been enrolled in the NYPA SilverScript or Medicare Advantage PPO plan, you will be disenrolled from both the NYPA Medicare Advantage PPO and SilverScript plans.

Your Medicare Advantage PPO medical coverage

Q18: What does the NYPA Medicare Advantage PPO cover?

A18: The NYPA-sponsored UnitedHealthcare Medicare Advantage PPO combines your current medical coverage plus your Medicare Part A and Part B coverage into one comprehensive medical plan that offers additional benefits and features.

You are covered for all benefits and services provided by Medicare Part A and Part B. Plus, you will have coverage for:

- Hearing aids
- Fitness benefits
- Nonemergency transportation benefits and meal delivery following an inpatient stay
- Dental care
- Vision care

In addition to dental and vision care covered by the Medicare Advantage PPO plan, NYPA is providing enhanced UnitedHealthcare dental and vision plans. The dental plan will provide preventive, diagnostic and minor dental care up to \$500 per year and the vision plan will provide an eyewear allowance every 24 months.

Q19: What doctors can I use?

A19: You can use the same doctors you use today. This is a unique plan designed specifically for NYPA Medicare-Eligible Management Retirees. You pay the same copay for an in-network or out-of-network provider. Wherever possible, you should use a provider who accepts Medicare and Medicare Advantage so that your healthcare treatments can be coordinated between your provider and UnitedHealthcare.

Q20: Is the plan available across the country?

A20: Yes, the UnitedHealthcare Medicare Advantage PPO plan offers nationwide coverage. That means that there are participating providers who accept Medicare near where you live or travel in the United States and the U.S. territories.

Q21: What happens if my doctor does not accept Medicare Advantage plans or participates in Medicare and does not accept this plan?

A21: You pay the same copay that you pay when you see a doctor that accepts Medicare.

Please call UnitedHealthcare Customer Services toll-free at 1-866-794-2841. They will call your provider and explain how the plan works and how the provider will be paid. Most

doctors accept this type of plan once they understand they do not need a contract and they will be paid the same as Medicare.

If your doctor still does not want to accept this plan, you can continue to see the doctor. You may have to pay for the services upfront and then submit the bill to UnitedHealthcare for reimbursement. You will be reimbursed the amount you paid, less the same copay that you would have paid with an in-network provider.

Q22: How are claims from out-of-network providers processed?

A22: Whether your provider is in-network or out-of-network, your provider can submit claims to UnitedHealthcare online. If needed, the UnitedHealthcare claim address information is on your UnitedHealthcare member ID card and in your Quick Start Guide.

UnitedHealthcare processes claim payments for out-of-network providers in compliance with all federal regulations.

Q23: How does an out-of-pocket maximum work?

A23: An out-of-pocket maximum limits how much money you pay for your medical expenses in a calendar year. Since January 1, 2022, the NYPA annual medical out-of-pocket maximum is \$2,000, which includes the copays you pay for your covered medical expenses. It will be separate from your NYPA prescription drug out-of-pocket maximum, of \$1,000.

Q24: Is there a hospital deductible?

A24: No. The UnitedHealthcare Group Medicare Advantage (PPO) plan does not have a hospital deductible.

Q25: What is the maximum number of days covered for hospital admission?

A25: There is no maximum number of days covered for hospital admission.

Q26: I have COBRA for dental coverage. How will that work with the UnitedHealthcare dental plan?

A26: The UnitedHealthcare dental plan will be the primary plan for your coverage. This means that your dentist should bill UnitedHealthcare Dental for your care. When you go to see your dentist, show your dentist your UnitedHealthcare Medicare Advantage PPO ID card.

If you decide to keep your COBRA dental plan from Delta Dental, then you or your dentist can submit a claim for the balance due to your COBRA plan as the secondary plan.

Q27: What is the UnitedHealthcare® HouseCalls program?

Q27: UnitedHealthcare HouseCalls is an annual wellness program designed to complement your doctor's care and offered to you for no extra cost.

The program sends a licensed health care practitioner to visit you at home. During the visit, they will:

- Review your medical history and current medications
- Perform a health screening
- Identify health risks and provide health education

It's also a chance for you to ask any health questions you may have. HouseCalls will send a summary of your visit to your primary care provider so that they have this additional information regarding your health.

HouseCalls may not be available in all areas.

Q28: Do I still need to use my red, white and blue Medicare card?

A28: You will use your UnitedHealthcare Medicare Advantage member ID card for most covered medical services. It is important that you use your UnitedHealthcare member ID card each time you receive medical care.

Any claims for your care will be sent to UnitedHealthcare – not Medicare – and UnitedHealthcare pays all claims directly. By showing your UnitedHealthcare member ID card, you can help make sure that your claims get processed correctly and accurately in a timely manner. Take your SilverScript ID card as well, in case your doctor needs to send in a prescription for you.

Make sure to put your red, white and blue Medicare Health Insurance card somewhere for safe keeping. You may still need your Medicare card for some services, like the COVID-19 vaccination.

Your SilverScript prescription drug coverage

Q29: What do I have to pay when I get my prescription filled?

A29: This prescription drug plan combines NYPA's prescription drug benefits with Medicare Part D and is designed to mirror your current prescription drug benefit. In most cases, you will pay the same copay that you currently pay for prescription drugs.

Q30: How does my prescription drug benefit work with Medicare Part D?

A30: In the *Summary of Benefits* included in this packet and the materials you will receive from SilverScript, you will see information that shows the different stages or benefit levels for a standard Medicare Part D plan.

You don't have to worry about the different stages. The additional prescription drug coverage provided by NYPA covers the gaps between a standard Medicare Part D plan and your current coverage. In most cases, you will have the same copay that you have in your current plan.

Once you reach \$7,400 in Medicare out-of-pocket costs, you pay the lower of your current NYPA copay or Medicare's Catastrophic Coverage coinsurance or copay.

Q31: How does a Medicare Part D plan work?

A31: The standard Medicare Part D plan has four stages or benefit levels. The table below shows how these stages work in 2023 for a standard Medicare Part D plan and for your SilverScript plan.

Stage	Standard Medicare Part D Plan <u>without</u> your additional prescription drug coverage provided by NYPA	SilverScript <u>with</u> your additional prescription drug coverage provided by NYPA <u>This is what you pay</u>
Deductible	\$ 505	\$ 0
Initial Coverage	After meeting the individual deductible, a person pays 25% of the drug cost until he or she reaches \$4,660 in total drug costs.	Since you have no deductible, you start in this stage and pay your NYPA copay.
Coverage Gap	Formerly called the “donut hole.” Since 2020, a person pays the same 25% of the drug cost as in the Initial Coverage stage. During the Coverage Gap stage, brand drugs are discounted by the manufacturer. The amount of this discount counts toward the person’s Medicare Part D out-of-pocket costs.	You continue to pay only your NYPA copay. After you reach the NYPA annual individual prescription drug out-of-pocket maximum of \$1,000 you pay nothing for the rest of the calendar year.
Catastrophic Coverage	After a person reaches \$7,400 in Medicare Part D out-of-pocket costs, he or she pays the greater of : <ul style="list-style-type: none"> • 5% of the drug cost, or • \$4.15 for generic drugs • \$10.35 for brand-name drugs 	After you reach \$7,400 in Medicare Part D out-of-pocket costs, you pay the lower of : <ul style="list-style-type: none"> • Your NYPA copay or • The Medicare Catastrophic Coverage cost-share, the <u>greater</u> of <ul style="list-style-type: none"> ○ 5% of the drug cost or \$4.15 for generic drugs or drugs treated like generic drugs ○ 5% of the drug cost or \$10.35 for all other drugs After you reach the NYPA annual individual prescription drug out-of-pocket maximum of \$1,000 you pay nothing for the rest of the calendar year.

Q32: How will Medicare's out-of-pocket costs of \$7,050 apply to me? I will reach the NYPA annual individual prescription drug out-of-pocket maximum of \$1,000 before I will reach \$7,050 in Medicare out-of-pocket costs.

A32: Yes, in many cases that may be true. But Medicare's annual out-of-pocket cost includes more than just the amount you have paid during the calendar year. It also includes the manufacturer discount for any brand name drugs on the SilverScript formulary that you receive during the Coverage Gap stage, as well as any payments made by others, such as Medicare's Extra Help program.

Q33: What does the additional prescription drug coverage provided by NYPA cover?

A33: The additional prescription drug coverage provided by NYPA fills the gap between a standard Medicare Part D plan and your current coverage, such as:

- Pays the difference in cost between your current copay and what a standard Medicare Part D plan would pay. You have NO deductible.
- Covers drugs not on SilverScript's drug list or formulary.
- Covers certain drugs that are not covered by Medicare Part D.

Filling your prescriptions

Q34: Which pharmacies can I use?

A34: SilverScript has over 66,000 network pharmacies across the country, including but not limited to CVS Pharmacy®, Costco, Duane Reade, Kinney Drug, Rite Aid, Sam's Club, Walgreen, Walmart, etc. The mail order pharmacy will be CVS Caremark Mail Service Pharmacy.

You must use a network pharmacy to fill your prescriptions to have your copays count toward your Medicare total drug costs and Medicare out-of-pocket costs, unless it is an emergency or special circumstance, such as illness when traveling in an area with no network pharmacy.

Q35: What are preferred network retail pharmacies?

A35: SilverScript has preferred network retail pharmacies where you can get up to a 90-day supply of your maintenance medications for the same copay as mail order.

You will also be able to get up to a 90-day supply of your maintenance medication at a non-preferred network retail pharmacy, but the amount you pay will be three times the cost of a 30-day supply.

Preferred network retail pharmacies include CVS Pharmacy, Longs Drugs (operated by CVS Pharmacy) and Navarro Discount Pharmacy.

Q36: Where can I get more information about SilverScript’s network pharmacies, including preferred network retail pharmacies?

A36: There will be a Pharmacy Directory in the Welcome Kit that you will receive when you are enrolled in SilverScript. It will list all the network pharmacies in your area.

You can go to www.caremark.com and use the Pharmacy Locator tool to find a network pharmacy near where you live, where you work or where you are traveling. It will note if a pharmacy is “Preferred,” meaning it is a preferred network retail pharmacy.

You may also call SilverScript Customer Care if you need help finding a network retail pharmacy, including a preferred network retail pharmacy. Representatives are available at (844) 449-0370, 24 hours a day, 7 days a week. TTY users should call 711.

Q37: What happens if I use a pharmacy that is not part of SilverScript’s pharmacy network?

A37: You may be covered when you get your prescriptions filled at an out-of-network pharmacy – a pharmacy that is not a part of the SilverScript pharmacy network. For prescriptions filled at out-of-network pharmacies, you will pay the same copay that you pay for prescriptions filled at in-network retail pharmacies.

If you go to an out-of-network pharmacy and try to use your SilverScript ID card to fill a prescription, the pharmacy may not be able to submit the claim directly to SilverScript. When that happens, you will have to pay the full cost of your prescription. You will need to send SilverScript your request for reimbursement, along with your receipt showing the payment you have made. You will be reimbursed the plan’s share of the cost.

Q38: May I get my prescriptions filled at a Veterans Affairs (VA) pharmacy?

A38: No. VA pharmacies cannot be included in Medicare Part D plan networks. The federal government does not allow you to receive benefits from more than one government program at the same time.

If you are eligible for VA benefits, you may still use VA pharmacies under your VA benefits. However, the cost of those medications and what you pay out-of-pocket will not count toward your Medicare out-of-pocket costs or Medicare total drug costs. Each time you get a prescription filled, you can compare your NYPA benefit through SilverScript to your VA benefit to determine the best option for you.

Drugs Covered

Q39: What is a formulary?

A39: For SilverScript, the formulary is the list of drugs covered by the Medicare Part D portion of your benefit. It includes both brand name and generic drugs selected by the plan with the help

of doctors and pharmacists.

The additional prescription drug coverage provided by NYPA will cover any drugs that are covered on your current plan but are not included in the SilverScript formulary.

Q40: What if my drug is not on the formulary?

A40: Through the additional prescription drug coverage provided by NYPA, you are covered for certain drugs that are not on the SilverScript formulary but are currently covered by NYPA.

You will receive a *Formulary* booklet in your Welcome Kit. If your drug is not listed in the *Formulary*, call SilverScript Customer Care at (844) 449-0370 to find out if your drug is covered. TTY users should call 711.

Q41: What should I do if I get a letter saying that a drug I am taking is not covered by SilverScript or has certain limits?

A41: Call SilverScript Customer Care to find out if your drug is covered through the additional prescription drug coverage provided by NYPA, or if there are any limitations, such as prior authorization, quantity limits or step therapy.

If your drug is not on the SilverScript formulary or has limitations, SilverScript is required by Medicare to send you a letter, even if your medication is covered through the additional prescription drug coverage provided by NYPA.

Q42: When do I need to get a prior authorization (PA)?

A42: You will need to get a prior authorization for drugs that have a “PA” next to them in the *Formulary*.

If your drug requires a prior authorization, you will be able to receive up to a 31-day supply of your current drug during the first 90 days that you are enrolled in the plan. This will give you time to talk to your doctor about the prior authorization or alternative medications.

Q43: What do I need to do if my drug can be covered under Part B or Part D?

A43: Certain drugs may be covered under Part B for some medical conditions and under Part D for other medical conditions. If your drug can be covered under Part B or Part D, your pharmacist will need to obtain a Part B or Part D determination, a special kind of prior authorization, before the drug can be filled after your effective date.

This determination is done when the pharmacist submits the prescription in the system. The pharmacist will need to provide additional information and may need to contact your doctor. In most cases, these determinations can be made at the pharmacy.

If your drug is covered under Part B, it will be covered by the NYPA Medicare Advantage PPO plan. If your drug is covered under Part D, it will be covered by SilverScript. You should take both your medical and prescription drug ID cards with you when you go to the pharmacy.

Drugs that require a Part B or Part D determination have a “B/D” next to them in the *Formulary*.

Q44: What is step therapy?

A44: In some cases, SilverScript may require you to first try a certain drug to treat your condition before the plan will cover another drug for that condition.

For example, if Drug A and Drug B treat the same medical condition and Drug A is just effective as Drug B, the plan may require you to try Drug A first. If Drug A does not work for you, the plan then will cover Drug B. This is called **step therapy**.

Drugs that require step therapy have a “ST” next to them in the *Formulary*.

Q45: I take a maintenance medication and have refills that will continue after my effective date. What do I need to do?

A45: Any eligible mail-order prescriptions with refills remaining will be transferred automatically to SilverScript. If you have filled your maintenance medications at a retail pharmacy, you just need to go to your pharmacy and show your pharmacist your new SilverScript ID card after your effective date. If you used the mail order pharmacy, you need to call SilverScript Customer Care after your effective date to approve the transfer of your mail-order prescription.

Prescriptions for controlled substances, compound medications and expired prescriptions will not transfer. If you have a medication in these categories, you must get a new prescription from your doctor.

Q46: What is Medication Therapy Management?

A46: Medicare requires Medicare prescription drug plans to offer an optional free service called Medication Therapy Management (MTM). If you take multiple medications, have a chronic condition or have high drug costs, you may be invited to participate in an MTM program designed for your specific health issue. You may choose not to participate, but you should carefully consider taking advantage of this free service.

Extra Help from Medicare

Q47: What is Extra Help?

A47: Extra Help is a Medicare program that helps individuals who have low income and resources to pay for prescription drug costs. For 2022, you may qualify if you have:

- No more than \$20,385 in income or \$15,510 in resources for an individual
- No more than \$27,465 in income or \$30,950 in resources for a married couple

Resources include such things as bank accounts, stocks and bonds. Social Security does not count your home, car, or any life insurance policy as resources. You may still qualify even if your income is over the amounts above.

Q48: How do I know if I am eligible for Extra Help from Medicare?

A48: If you are identified as a person who qualifies for Extra Help to pay for your prescription drug costs, you will receive a letter from Medicare or the Social Security Administration.

Some people automatically qualify for Extra Help; for instance, if they have full Medicaid coverage, get help from Medicaid to pay their Part B premiums, or if they receive Supplemental Security Income (SSI) benefits.

To see if you qualify for Extra Help, you can:

- Call Medicare at (800) MEDICARE [(800) 633-4227]. TTY users should call (877) 486-2048. Assistance is available 24 hours a day, 7 days a week.
- Visit <https://www.medicare.gov>.
- Call the Social Security Office at (800) 772-1213 between 8 a.m. and 7p.m., Monday through Friday to speak with a representative. Automated messages are available 24 hours a day. TTY users should call (800) 325-0778.
- Visit <https://www.socialsecurity.gov/prescriptionhelp>.

Q49: How does Extra Help work with my NYPA coverage?

A49: If you qualify for Extra Help, your share of the cost will be reduced. Extra Help copays range from \$0 to 15% coinsurance. The Low-Income Subsidy (LIS) Rider included with your SilverScript Welcome Kit will tell you the exact amount of your copay or coinsurance in 2023.

You will pay the **lower of**:

- Your Extra Help copay or coinsurance; or
- Your NYPA copay.

Paying for Coverage

Q50: What premium do I have pay for my NYPA Medicare Advantage PPO and SilverScript coverage?

A50: NYPA currently does not charge a monthly premium for the Medicare Advantage PPO and SilverScript coverage.

Q51: Do I still have to pay a Medicare Part B premium?

A51: Yes, even though you are being enrolled in a Medicare Advantage plan, you still have to pay the Medicare Part B premium. For most retirees, this is deducted from your Social Security payment.

NYPA will reimburse you for the base Medicare Part B premium. Information on the reimbursement process will be sent to you at the end of each calendar year.

If you have high income, you may have to pay an additional income-based premium for Medicare Part B directly to Social Security or Medicare. NYPA does not reimburse you for any additional income-based Medicare Part B premium.

Q52: Do I have to pay a Part D premium to Medicare?

A52: No, you will not have to pay a base Medicare Part D premium to Medicare, like you do for Part B. However, if you have high income, you may have to pay an income-based premium for Medicare Part D directly to Social Security or Medicare. NYPA does not reimburse you for any additional income-based Medicare Part D premium.

Q53: How does my income affect what I have to pay for my Medicare coverage?

A53: Some people may have to pay an extra amount for Medicare Part B and Medicare Part D. If your modified adjusted gross income (MAGI) reported on your federal tax return is above a certain amount, Medicare requires that you pay an extra amount for your Medicare coverage. It is called an Income-Related Monthly Adjustment Amount or IRMAA. For Medicare Part B, it is referred to as "Part B IRMAA" and for Medicare Part D, it is referred to as "Part D IRMAA."

For 2023, if your MAGI from 2021 is over \$97,000 for an individual or \$194,000 for a married couple filing jointly, you must pay this additional amount.

You will be notified by Social Security if you have to pay this additional amount. It is deducted from your Social Security payment. If you do not receive Social Security or your Social Security payment is not enough to cover the additional premium, Medicare will send you a bill. The additional amount is not paid to NYPA, UnitedHealthcare or SilverScript. NYPA does not reimburse you for any IRMAA for Medicare Part B or D.

It is important that you make the payment, if required. If not, Medicare will notify UnitedHealthcare and/or SilverScript that it must stop your medical or prescription drug coverage and you will be disenrolled from the plan. If you are disenrolled from the plan, you will lose both your medical and prescription drug coverage from NYPA, as well as your NYPA Medicare Part B reimbursement.

Late Enrollment Penalty

Q54: What is the Late Enrollment Penalty?

A54: The Late Enrollment Penalty (LEP) is the amount that Medicare requires a person to pay if he/she:

- Did not enroll in Medicare Part B when first eligible for Medicare
- Did not enroll in a Medicare prescription drug plan when first eligible for Medicare or after January 1, 2007, whichever is later
- Did not have creditable medical and prescription drug coverage
- Had a break in coverage for 63 or more consecutive days.

Q55: I have been covered on NYPA's medical/prescription drug plan since I retired. Do I have to worry about the Medicare Part D late enrollment penalty?

A55: Every year since Medicare Part D was launched in 2006, you have been sent a Creditable Coverage notice from NYPA if your NYPA prescription drug coverage is a creditable prescription drug plan, meaning it has met or exceeded the Medicare Part D coverage standard. If you received a creditable coverage notice for every year you have been covered by an NYPA plan since you retired, then you don't have to worry about a late enrollment penalty.

However, if you had a break in coverage and were not enrolled in your NYPA plan for 63 or more consecutive days, you may have a late enrollment penalty.

You will be notified if Medicare's records show that you have a break in creditable prescription drug coverage.

Q56: What happens if I am contacted by SilverScript about a late enrollment penalty?

A56: If SilverScript contacts you, they may need information about your past prescription drug coverage to send to Medicare. Please make sure you provide the information requested in the notice. You may also ask that any decision about your late enrollment penalty be reconsidered.

Watch for information from UnitedHealthcare and SilverScript

Q57: What information will I receive from UnitedHealthcare and when?

A57: After your enrollment has been processed by Medicare, UnitedHealthcare will send you a Welcome Kit, which includes a Quick Start Guide and your UnitedHealthcare member ID card.

Q58: What information will I receive from SilverScript and when?

A58: After your enrollment has been processed by Medicare, you will receive two mailings from SilverScript:

1. ID Card mailing

- **ID card** – your new ID card with your unique ID number. Do not use this card until your effective date.
- **Confirmation of Enrollment letter** – letter confirming your enrollment in SilverScript.
- **Low Income Subsidy (LIS) Rider** – if you are eligible for Extra Help from Medicare, this document will tell you what your copay will be for drugs covered by Medicare Part D.

2. A Welcome Kit from SilverScript which will include important information about your plan, such as:

- **Formulary** – list of drugs covered by the Medicare Part D portion of the plan.
- **Evidence of Coverage** – this booklet provides details on your rights and the rules you must follow when using the Medicare Part D portion of your prescription drug coverage.
- **Pharmacy Directory** – the list of network pharmacies in your area, including preferred network retail pharmacies.

Your coverage goes into effect on your effective date. You will receive a Monthly Prescription Drug Summary, also called an Explanation of Benefits, during the month following any month that you get prescription drugs through the plan. For instance, in February 2023, you will receive a Monthly Prescription Drug Summary listing any drugs you received in January 2023.

Q59: Who do I call if I have questions?

A59: If you have any additional questions or need more information, contact:

- UnitedHealthcare Customer Service
(866) 794-2841
TTY: 711
24 hours a day, 7 days a week
- SilverScript Customer Care
(844) 449-0370
TTY: 711
24 hours a day, 7 days a week
- NYPA HR Services Hotline
(914) 287-3114
Monday-Friday, 9 a.m. to 5 p.m. Eastern time
Email: Retirees@nypa.gov
Webpage: www.nypa.gov/benefits/retirees

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